APPLICATION DATA SHEET FORM

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Application Data Sheet Form Country:: U.S.A. Postal or Zip Code:: 02210 Telephone One:: (617) 720-3500 Telephone Two:: (617) 573-7830 Fax Number: (617) 720-2441 Electronic Mail:: lgreen@wolfgreenfield.com **Application Information** Title Line One:: TEMPERATURE COMPENSATION SYSTEM FOR A Title Line Two:: COORDINATE MEASURING MACHINE **Total Drawing Sheets:**: 9 Formal Drawings?:: No Claims:: 26 Application Type:: Utility Docket Number:: B0917.70027US00 Licensed US Govt. Agency:: Contract or Grant Numbers One:: Contract or Grant Numbers Two:: Secrecy Order in Patent Appl.?:: Representative Information Representative Customer Number:: 23628 **Continuity Information** This application is a:: >Application One:: Filing Date:: Patent Number:: which is a:: >>Application Two:: Filing Date:: Patent Number::

Application Data Sheet Form

and which is a::

>>Application Three::

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This application is a::

>Application Four::

Filing Date:: Patent No.::

Prior Foreign Applications

Foreign Application One::

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Priority Claimed::

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